

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HM		11-20-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A-S	943	11-28-01
RESPONSE FORMALITY REVIEW	AK	917	02-01-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 +- Restricted O Objected

Claim	Date
Final	
Original	
1	3/9
2	5/16
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy